

REQUEST FOR PROPOSALS
RHODE ISLAND DEPARTMENT OF HEALTH
TOBACCO CONTROL PROGRAM
STATEWIDE YOUTH EMPOWERMENT PROJECT
(Street Theater)

SECTION 1: INTRODUCTION

The Rhode Island Department of Health (HEALTH), Division of Disease Prevention and Control, Tobacco Control Program is soliciting proposals from community-based public or non-profit organizations to implement activities for the WORD Youth Empowerment Project throughout Rhode Island. The Scope of Work is described in Section 4 of the RFP. Funding for FY2005 is available through a grant from the American Legacy Foundation and is contingent upon the contract award. A total of \$35,000 is available to fund one project. The initial project period is expected to begin approximately October 1, 2004 and continue through March 31, 2005. Proposals will be evaluated on the basis of the relative merits of the proposal, in addition to an appropriate and realistic budget.

SECTION 2: BACKGROUND

The Rhode Island Department of Health, Tobacco Control Program (TCP) received funding in FY 2000 from the American Legacy Foundation to develop a plan for an anti-tobacco, youth empowerment program for the state. Working with teen representatives from Youth Advocacy agencies from across the state, young adult bridge mentors and staff from the TCP over a 9-month period, the group developed a comprehensive program proposal. The American Legacy Foundation selected the proposal for funding for 2.5 million dollars over a three-year period. The youth have named their project *WORD*.

The proposal identifies a plan for *WORD* to implement an artistic approach to tobacco control by using cultural, community-based arts to build self-esteem and empowerment for youth and community members across Rhode Island.

The project has been underway and established a statewide presence through a collaboration that includes AS220 and Initiatives for Human Development to carry out statewide activities, and 9 local projects. The agency identified through this RFP process will focus on street theater presentations by youth statewide to increase the number of youth involved in the Youth Empowerment Movement.

In Rhode Island, the Tobacco Control Program in the Division of Disease Prevention and Control at the Rhode Island Department of Health is the governmental organization responsible

for addressing smoking as a major public health problem. The Tobacco Control Program has four major goals, which were developed by a statewide Coalition:

1. Preventing the initiation of tobacco use among young people.
2. Promoting quitting among young people and adults.
3. Eliminating nonsmokers' exposure to environmental tobacco smoke (ETS).
4. Identifying and eliminating the disparities related to tobacco use and its effects among different population groups.

Smoking has decreased since 2001 from 25% to 19.3% among high school age students. The current adult total is 22%. The primary intent of the grant is to prevent youth initiation of tobacco usage and to reduce and/or eliminate tobacco usage among youth already addicted to tobacco products.

HEALTH also supports the additional goals of Healthy People 2000 of reducing the initiation of smoking by children and youth so that no more than 15% become regular cigarette smokers by age 20, and reducing the use of smokeless tobacco by males aged 12 to 24 to a prevalence of no more than 0.5%.

SECTION 3: ELIGIBILITY CRITERIA

Eligible applicants must be community-based public or non-profit agencies who are in good standing with the Federal government. Applicant organizations that have a smoke free workplace policy in place should include this with their application. Applicants must be able to demonstrate the stability of their organization as well as effective management and administrative performance.

SECTION 4: ADMINISTRATIVE INFORMATION

PROJECTED TIMETABLE:

August 13, 2004	Proposals issued
September 3, 2004	Proposals due at HEALTH by 3:30 PM
September 20, 2004	Approximate Start Date of Contract

SUBMISSION PROCEDURES:

The deadline for submission of proposals is 3:30 on September 3, 2004. No applications will be accepted after this date and time. Proposals sent by mail are sent at your own risk. Applicants are urged to hand deliver their proposals, which will be date, stamped upon receipt. Faxed applications are not acceptable.

All proposals must be typed in English and single-spaced. The Proposal Narrative is limited to six pages (this excludes budget and appendices). An original and 6 copies must be delivered to:

Elizabeth F. Harvey, Project Manager
Rhode Island Department of Health
Three Capitol Hill, Room 409
Providence, RI 02908-5097

SELECTION PROCESS:

Proposals will be reviewed by a committee comprised of staff from State departments who have experience working with community-based programs. Proposals will be reviewed and scored based upon the Proposal Evaluation Score Sheet (attached). The maximum possible score is 100 points and applications scoring below 60 points will not be considered. HEALTH reserves the right not to fund any proposals. Applicants that do not include any or all of the required components with their proposal will be considered non-compliant with the requirements of this RFP and will be disqualified from this process.

SECTION 5: SCOPE OF WORK

SCOPE OF WORK

The successful applicant will be responsible for the planning and implementation of a wide range of youth developed and youth-led arts-based activities all of which will involve youth participating in the activities focusing on street theater.

The successful applicant will be responsible for the following work:

1. PROVIDE YOUTH-LED AND DESIGNED ACTIVITIES TO REDUCE YOUTH SMOKING INITIATION AND EXPOSURE TO SECONDHAND SMOKE.

A. Provide activities that will increase the number of youth advocating for a decrease in tobacco advertising that targets young people.

B. Increase awareness of tobacco industry tactics to initiate youth as smokers by conducting youth-led educational campaigns to alert the public to tobacco industry attempts to shift responsibility from tobacco vendors to youth for illegal purchase of tobacco products.

C. Reduce exposure to secondhand smoke by providing activities that encourage not smoking in

homes and vehicles.

D. Provide educational opportunities to youth to promote increased knowledge and awareness of tobacco use issues; specifically to conduct street theater activities by youth statewide.

E. The vendor will be expected to attend monthly meetings to coordinate activity with other projects, to receive training, and/or to receive information or materials.

Target Population

Define the geographic area served and/or the demographics of the racial/ethnic groups served or both.

Please indicate how you will deliver culturally and linguistically appropriate services to racial and ethnic minority populations. Racial and ethnic minority populations are identified by OMB Directive 15 as: African Americans, Native Americans, Latinos/Hispanics and Asian Americans. Please include information pertaining to the following: The projected number of racial ethnic minority clients to be reached by the project, demonstrate the agency's access and/or proposed outreach to the population described above; and provide a description of how racial and ethnic composition of the target population will be given consideration in the selection and recruitment of administrative and service delivery staff. If these groups are not identified as a target population for service delivery by your program, please provide a paragraph explaining the reasons why these populations are not an appropriate target group for your program.

SECTION 6: REPORTING REQUIREMENTS

Successful applicants will be required to submit monthly activity reports and invoices by the tenth of the following month. A final project report including a description of program activities and results of policy interventions will be due within 30 days of the completion of the project.

SECTION 7: REQUIRED COMPONENTS OF THE PROPOSAL

1. **COVER PAGE:** The purpose of this page is to provide very basic summary and identification information regarding the proposal. Please use attached form.
2. **COVER LETTER:** Applicant agency must submit a cover letter from its Board of Directors and indicate the name of the agency's designated contact person and/or the name of the person who is authorized to sign the contract. Please include the agency's FEIN number.
3. **AGENCY DESCRIPTION:** Provide a description of your agency including:
 - type of agency
 - population served
 - proof of non-profit status (501c3); attach as an appendix
 - structure and organization of agency including the ethnicity of current staff and Board of Directors

4. PROPOSAL NARRATIVE: The narrative must include:

- a) Goals and Objectives. List measurable goals and objectives of your proposal using the Scope of Work and Overall Project Timeline discussed in this documentation as a guide. Include the number of advocates to be recruited, the number of youth to be reached through advocacy activities, and other activities listed in the Scope of Work.
- b) Background. Describe prior experience that demonstrates the agency's ability to work with youth in the community in arts and/or advocacy to provide the services described in the Scope of Work.
- c) Describe an Approach/Project Work Plan/Time Line that is clear and detailed and meets the needs of the target population. Clearly demonstrate when and how each task in the work plan will be carried out, and methods to assure participation of all players.
- d) Evaluation Plan. Applicant must outline a plan and clearly commit to conducting a comprehensive program evaluation as prescribed by HEALTH in collaboration with the Tobacco Control Enhancement Project, and has demonstrated experience and success in conducting evaluation programs.
- e) Project Staff & Organization. Staff proposed for the program must be capable. Resumes, job descriptions, and organizational charts for staff and Board of Directors' members should be included in the appendices, with race/ethnicity identified for each. Indicate percentage of time each staff member will devote to the project.

SECTION 8. BUDGET AND BUDGET NARRATIVE:

- 1. Project Budget (Year 1)- submit a budget for a 12-month period.
- 2. Budget Narrative: detailed description of each budget outline entry.

This component consists of two parts--a budget summary that lists allowable expenses and a budget narrative that describes each budget line item entry. The budget narrative must also include personnel, the percentage of time each staff member will devote to the project, and hourly wages. Please show a 10% verifiable match (required contribution) by your agency. Please submit a budget for a 12-month period that is sufficient to accomplish the project goals and not inflated. The contract award will be prorated based on initial start-up costs and monthly costs in accordance with the actual start date of the contract. Please include \$6000 in your budget for travel to one national tobacco control conference for 3 adults and 2 youth.

Applicants will be scored according to the overall soundness of the proposed budget and accompanying budget narrative, including the extent to which costs reflect direct services vs. administrative costs.

Those projects ranked highest by the Technical Review Committee may be asked to make oral

presentations or provide written clarifications or revisions prior to final recommendation for award.

SECTION 9: ATTACHMENTS

- A. Curriculum vitae/resumes for key personnel
- C. Copy of organization's Smoke-Free Policy (if applicable)
- D. Copy of organization's Board of Directors with race and ethnicity of board members indicated
- E. Copy of 501c3 (proof of non-profit status)

PROJECT BUDGET (YEAR 1)

12 MONTH PERIOD

<u>Expense Category</u>	<u>Amount Requested</u>
1. Personnel List Title of Position, FTE, and hourly wage	
2. Fringe Benefits	
3. Consultants List Title of Position(s) and hourly wage	
4. Travel (local)*	
5. Travel (out-of-state)	
6. Printing/Copying	
7. Supplies	
8. Resource Materials	
9. Telephone	
10. Postage	
11. Subcontracts (specify)**	
12. Other (describe)	
TOTAL:	

*Allowable reimbursement for in-state travel is .31/mile.

**No more than 25% of total grant request can be used to subcontract with any for-profit entity.
This line should not be used for payments to individuals.

Applicant must provide a verifiable match of at least 10%.

DETAIL OF PERSONNEL

NAME	POSITION TITLE	TOTAL AGENCY SALARY	RIDH PERSONNEL COST \$
TOTAL REQUEST			

DETAIL OF CONSULTANT

CONSULTANT ACTIVITY	HOURLY RATE	# OF HOURS REQUESTED	TOTAL CONSULTANT COST \$
TOTAL REQUEST			

BUDGET NARRATIVE

Please provide a detailed description and justification of each cost associated with this project.

Include a description of the 10% verifiable matching contribution to be made by your agency.

PROPOSAL EVALUATION SCORE SHEET

Representatives of HEALTH will form a Review Committee to make recommendations on proposals based on the evaluation criteria below. All reviewers shall use this form to score each proposal. The possible maximum score is 100 points. Proposals that are scored below 60 points will not be considered.

- | | |
|-------------------|---|
| <hr/> 0-20 points | 1. Goals and Objectives and Time line
Applicant demonstrated feasibility and clarity of program goals and objectives, as well as the expected amount of time required to implement program services. |
| <hr/> 0-15 points | 2. Background
Applicant has demonstrated experience working with youth advocates on related issues that will enable them to provide the services in the Scope of Work. |
| <hr/> 0-15 points | 3. Approach/Project Work Plan
Applicant has presented a plan of action that is clear and detailed, and meets the needs of the target population. The applicant has clearly demonstrated when and how each task in the work plan will be carried out, and methods to be used to assure participation of all players. |
| <hr/> 0-15 points | 4. Evaluation
Applicant must outline a plan and clearly commit to conducting a comprehensive program evaluation as prescribed by HEALTH, and has demonstrated experience and success in conducting evaluation programs. |
| <hr/> 0-15 points | 5. Project Staff and Organization
Applicant has demonstrated that the staff proposed for this project is capable; and required appendices are included with the RFP. |
| <hr/> 0-20 points | 6. Budget
Applicant has submitted a budget and budget narrative that reflects appropriate expenses to accomplish the project goals, and is cost-effective. |

TOTAL SCORE

COMMENTS: _____

COVER PAGE

The purpose of this page is to provide very basic summary information about the proposal that the prospective funding source can review quickly and use for identification.

NAME OF APPLICANT AGENCY _____

ADDRESS OF APPLICANT AGENCY _____

PHONE NUMBER _____

FAX NUMBER _____

F.E.I.N. Number _____

PROJECT TITLE _____

AMOUNT REQUESTED: _____

CONTACT PERSON: _____

E-MAIL ADDRESS: _____

SUMMARY OF PROJECT: In not more than two paragraphs in the space below, briefly describe the project.